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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Yolanda First name Gail Middle name Harrell-Fenton Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or		
	maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0427	

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Case number (if known)

Debtor 1 Yolanda Gail Harrell-Fenton

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and		■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s)			
	doing business as names	Business name(s)	Dadinese Hame(e)			
		EINs	EINs			
j.	Where you live		If Debtor 2 lives at a different address:			
		8527 W. 99th Terrace Apt. 204 Palos Hills, IL 60465 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
			Number, Street, City, State & ZIP Code			
		Cook County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
).	Why you are choosing	Check one:	Check one:			
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Debtor 1 Yolanda Gail Harrell-Fenton

Case number (if known)

Par	Tell the Court About	our Ban	kruptcy Ca	ise				
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	☐ Cha _l	oter 7					
		☐ Chap	oter 11					
		☐ Cha _l	oter 12					
		■ Cha	pter 13					
8.	How you will pay the fee	at or	out how yo	e entire fee when I file my pour may pay. Typically, if you a attorney is submitting your paddress.	are paying	the fee yourself,	you may pay with cash	n, cashier's check, or money
				the fee in installments. If		e this option, sign	and attach the Applica	ation for Individuals to Pay
			•	e in Installments (Official For at my fee be waived (You ma		this option only it	f you are filing for Char	oter 7. By law a judge may
		bı	ut is not req oplies to you		may do so able to pay	o only if your inco the fee in install	me is less than 150% of ments). If you choose	of the official poverty line that this option, you must fill out
9.	Have you filed for bankruptcy within the last 8 years?	□ No. ■ Yes.						
	,			Northern District of				
			District	Illinois	When	1/24/12	Case number	12-02379
			District	-	When		Case number	
			District		When		Case number	
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
			Debtor				Relationship to y	/ou
			District		When		Case number, if	known
			Debtor	-			Relationship to y	/ou
			District		When		Case number, if	known
11.	Do you rent your	■ No.	Go to I	ine 12.				
	residence?	☐ Yes.	Has yo	our landlord obtained an evict	ion judgm	ent against you a	nd do you want to stay	in your residence?
				No. Go to line 12.				
				Yes. Fill out <i>Initial Statemen</i> bankruptcy petition.	nt About ar	n Eviction Judgme	ent Against You (Form	101A) and file it with this

		Document	Page 4 01 55	
Debtor 1	Yolanda Gail Harrell-Fenton		3	Case number (if known)

art	3: Report About Any Bu	sinesses	You Owr	as a Sole Proprieto	or			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Name	and location of busing	ness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	oer, Street, City, State	e & ZIP Code			
	it to this petition.		Chec	k the appropriate box	to describe your business:			
				Health Care Busine	ess (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real I	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as de	fined in 11 U.S.C. § 101(53A))			
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))			
				None of the above				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines	s. If you ir is, cash-f s.C. 1116	ndicate that you are a low statement, and fe (1)(B).	ourt must know whether you are a small business debtor so that it can set appropriate small business debtor, you must attach your most recent balance sheet, statement of deral income tax return or if any of these documents do not exist, follow the procedure			
	For a definition of small	No.	I am ı	not filing under Chapt	er 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.				
		☐ Yes.	I am f	iling under Chapter 1	1 and I am a small business debtor according to the definition in the Bankruptcy Code.			
art	4: Report if You Own or	Have Any	/ Hazardo	ous Property or Any	Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat of imminent and	■ No. ☐ Yes.	What is	the hazard?				
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	Number Circus City Class 8 7 to Oads			
					Number, Street, City, State & Zip Code			

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Debtor 1 Yolanda Gail Harrell-Fenton

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2	(Spouse	Only in a	Joint	Case):
-----------------------	---------	-----------	-------	--------

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 55 Case number (if known) Debtor 1 **Yolanda Gail Harrell-Fenton** Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will □ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Yolanda Gail Harrell-Fenton Signature of Debtor 2 Yolanda Gail Harrell-Fenton

Executed on

MM / DD / YYYY

Signature of Debtor 1

Executed on October 4, 2016

MM / DD / YYYY

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Debtor 1 Yolanda Gail Harrell-Fenton

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Jeffrey	L. Benson	Date	October 4, 2016
Signature of	Attorney for Debtor		MM / DD / YYYY
Jeffrey L.	Benson		
Printed name			
Law Office	es of Jeffrey L. Benson		
Firm name	•		
3337 W. 95	5th Street		
Ste. # 2			
Evergreen	Park, IL 60805		
Number, Street,	City, State & ZIP Code		
Contact phone	312-607-0048	Email address	jeffrey-benson@sbcglobal.net
6203738			
Bar number & S	tata		

		Docume	ent Page 8 of 55	
Fill in this infor	mation to identify your	case:		
Debtor 1	Yolanda Gail Har	rell-Fenton		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	44,510.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	44,510.00
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	42,410.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	28,859.00
	Your total liabilities	\$	71,269.00
Pai	t3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,831.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,186.00
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	a personal,	, family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

the court with your other schedules.

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Page 9 of 55 Case number (if known) Debtor 1 Yolanda Gail Harrell-Fenton

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form \$ 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

4,055.82

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total c	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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-ill in	this information to ic	lentify your	case and this filing:			
Debto	r 1 Yoland		rell-Fenton	Loot Nome		
ebto			Middle Name	Last Name		
	e, if filing) First Name		Middle Name	Last Name		
Inited	d States Bankruptcy Co	ourt for the:	NORTHERN DISTRICT OF ILL	INOIS		
`ase	number					☐ Check if this is ar
						amended filing
Offic	cial Form 106	SA/B				
	nedule A/B		ertv			12/15
			e items. List an asset only once. It	f an asset fits in more than o	ne category, list the asset in	
forma nswei	ation. If more space is ne every question.	eded, attach	ate as possible. If two married peop a separate sheet to this form. On the a, Land, or Other Real Estate You C	the top of any additional pag		
Do y	ou own or have any lega	al or equitable	e interest in any residence, buildin	g, land, or similar property?		
■ N	lo. Go to Part 2.					
ПΥ	es. Where is the property	?				
art 2:	Describe Your Vehicle					
□ N ■ Y	-					
3.1	Make: Jeep		Who has an interest in t	the property? Check one	Do not deduct secured of the amount of any secure	aims or exemptions. Put ed claims on Schedule D:
	Model: Cherokee		Debtor 1 only			ims Secured by Property.
	Year: 2015	40	Debtor 2 only		Current value of the	Current value of the
	Approximate mileage: Other information:	46	,000 Debtor 1 and Debtor 2 At least one of the del		entire property?	portion you own?
			Check if this is communicated (see instructions)	munity property	\$25,184.00	\$25,184.00
2.0	Make: Ford		Who has an interest in	th a manage of the control of the co	Do not deduct secured c	aims or exemptions. Put
3.2	Make: Ford Model: Fusion		Who has an interest in t	tne property? Check one	the amount of any secure	ed claims on Schedule D: ims Secured by Property.
	Year: 2012		Debtor 1 only ☐ Debtor 2 only			, , ,
	Approximate mileage:	70	,000 Debtor 1 and Debtor 2	2 only	Current value of the entire property?	Current value of the portion you own?
			At least one of the del	btors and another		
-	Other information:					
	Other information: Debtor is surrende vehicle	ering the	Check if this is come (see instructions)	munity property	\$17,226.00	\$17,226.0

Official Form 106A/B Schedule A/B: Property page 1

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\$42,410.00 \$42,41	Del	otor 1 Yolanda Ga	il Harrell-Fenton Documen	t Page 11 of	f 55 Case number (if	known)	
Do you own or have any legal or equitable interest in any of the following items? Current value of the proton you own? Do not deduct secured claims or exemptions. Beamples: Major appliances, furniture, linens, china, kitcherware Ves. Describe Household and Furniture						=> \$42,410.00	
Do you own or have any legal or equitable interest in any of the following items? Current value of the proton you own? Do not deduct secured claims or exemptions. Beamples: Major appliances, furniture, linens, china, kitcherware Ves. Describe Household and Furniture	Par	3: Describe Your Perso	onal and Household Items				
No Ves. Describe				ollowing items?		<pre>portion you own? Do not deduct secured</pre>	
Rectronics Rec	[E <i>xamples:</i> Major appliar ☑ No —					
7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games No Yes. Describe 2 TVS \$150.00 3. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe 10. Firearms Examples: Pistols, rilles, shotguns, ammunition, and related equipment No Yes. Describe 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No Yes. Describe Ciothes Soo.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe 13. Non-arm animals Examples: Dogs, cats, birds, horses No Yes. Describe	•	Fes. Describe					
Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, garnes No Yes. Describe 2 TVs \$150.00 3. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe 8. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No Yes. Describe Clothes Clothes \$500.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, sliver No Yes. Describe 13. Non-farm animats Examples: Dogs, cats, birds, horses No Yes. Describe			Household and Furniture			\$600.0	0
3. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe Sequipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe No Securification No Yes. Describe Clothes Camples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No Yes. Describe Clothes Stamples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe		Examples: Televisions a including cel ☑ No —			s, printers, scanners; r	music collections; electronic devices	
Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No			2 TVs			\$150.0	0
□ Yes. Describe 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No ■ Yes. Describe \$500.00	9. E	Examples: Antiques and other collection of the c	and hobbies ographic, exercise, and other hobby equipr ruments	ment; bicycles, pool tab			
□ No □ Yes. Describe Clothes \$500.00 \$\$500.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No □ Yes. Describe 13. Non-farm animals Examples: Dogs, cats, birds, horses □ No □ Yes. Describe		☐ Yes. Describe					
 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe 13. Non-farm animals Examples: Dogs, cats, birds, horses No Yes. Describe 		⊐ No	lothes, furs, leather coats, designer wear, s	shoes, accessories			
 Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe 13. Non-farm animals Examples: Dogs, cats, birds, horses No Yes. Describe 			Clothes			\$500.00	0
Examples: Dogs, cats, birds, horses ■ No □ Yes. Describe	ı	Examples: Everyday je	ewelry, costume jewelry, engagement rings	, wedding rings, heirloc	om jewelry, watches, ç	gems, gold, silver	
	[Examples: Dogs, cats, No Yes. Describe		liot including and the	olsh oldo vav 454	4 lig4	

14. Any other personal and household items you did not already list, including any health aids you did not list

■ No

 $\hfill \square$ Yes. Give specific information.....

Page 12 of 55

Case number (if known) Document Debtor 1 Yolanda Gail Harrell-Fenton

			art 3, including any entries for pages you have attached	\$1,250.00
Part 4: Describe Your Fina	anaial Acces	to.		
Do you own or have any			р С	Current value of the cortion you own? On not deduct secured laims or exemptions.
16. Cash Examples: Money yo ■ No □ Yes			ome, in a safe deposit box, and on hand when you file your petition	
			ounts; certificates of deposit; shares in credit unions, brokerage houses with the same institution, list each.	, and other similar
Yes			Institution name:	
	17.1.	Checking	American Charter Bank - No balance kept	\$0.00
	17.2.	Savings	American Charter Bank - Average Daily Balance of \$200	\$200.00
9. Non-publicly traded joint venture■ No□ Yes. Give specific in the public of the publi	information	about them		LLC, partnership, and
Negotiable instrumer	rporate bonts include puments are	personal checks, cas those you cannot tra	% of ownership: tiable and non-negotiable instruments thiers' checks, promissory notes, and money orders. Instruments Instruments	
□ No	n IRA, ERI	SA, Keogh, 401(k), 4	03(b), thrift savings accounts, or other pension or profit-sharing plans	
Yes. List each acco		tely. of account:	Institution name:	
			Pension - 100% Exempt	Unknowr
	sed deposi	ts you have made so	that you may continue service or use from a company public utilities (electric, gas, water), telecommunications companies, or	others
Yes			Institution name or individual:	
			Security Deposit with Landlord	\$650.00

				Filed 10/04/16 Document	Entered 10/04/16 14:42:21 Page 13 of 55	Desc Main
De	ebtor 1	Yolanda Gail Harrell-	Fenton		Case number (if known)	
23.	Annuiti ■ No	es (A contract for a periodi	ic payment of	money to you, either for	life or for a number of years)	
	☐ Yes	lssuer name	and descripti	on.		
24.	26 U.S.C	s in an education IRA, in C. §§ 530(b)(1), 529A(b), and		n a qualified ABLE pro	gram, or under a qualified state tuition pro	gram.
	■ No □ Yes	Institution na	ame and desc	ription. Separately file th	ne records of any interests.11 U.S.C. § 521(c):	
25.	Trusts, ■ No	equitable or future intere	ests in prope	rty (other than anythin	g listed in line 1), and rights or powers exe	rcisable for your benefit
		Give specific information a	bout them			
26.		, copyrights, trademarks les: Internet domain names				
	☐ Yes.	Give specific information a	bout them			
27.		es, franchises, and other les: Building permits, exclu			n holdings, liquor licenses, professional license	es
		Give specific information a	bout them			
M	oney or p	property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	■ No	unds owed to you Give specific information ab	bout them, inc	luding whether you alre	ady filed the returns and the tax years	
	■ No			ısal support, child suppo	ort, maintenance, divorce settlement, property	settlement
30.		mounts someone owes y les: Unpaid wages, disabili benefits; unpaid loans	ity insurance p		efits, sick pay, vacation pay, workers' comper	sation, Social Security
		Give specific information				
31.		s in insurance policies les: Health, disability, or life	e insurance; h	ealth savings account (l	HSA); credit, homeowner's, or renter's insuran	се
		Name the insurance compa Com	any of each po pany name:	olicy and list its value.	Beneficiary:	Surrender or refund value:
			m Life Insur ender value	ance - No cash		\$0.00
32.	If you a someon	erest in property that is done the beneficiary of a living the has died. Give specific information			d surance policy, or are currently entitled to rece	ive property because

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33. Claims against third parties, v Examples: Accidents, employm □ No	whether or not you have filed a la nent disputes, insurance claims, or n		and for payment	
Yes. Describe each claim				
	Workman's Compensa	ation Claim - 100& E	Exempt	Unknown
34. Other contingent and unliquid	lated claims of every nature, incl	uding counterclaims	of the debtor and rights to	set off claims
☐ Yes. Describe each claim				
35. Any financial assets you did r	not already list			
■ No	•			
☐ Yes. Give specific information	٦			
36. Add the dollar value of all of for Part 4. Write that number	your entries from Part 4, includi		, -	\$850.00
Part 5: Describe Any Business-Relat	ed Property You Own or Have an Inte	erest In. List any real esta	ate in Part 1.	
37. Do you own or have any legal or e	quitable interest in any business-rela	ted property?		
No. Go to Part 6.				
☐ Yes. Go to line 38.				
Part 6: Describe Any Farm- and Com If you own or have an interest in	nmercial Fishing-Related Property You n farmland, list it in Part 1.	u Own or Have an Interes	st In.	
46. Do you own or have any legal	or equitable interest in any farm	- or commercial fishir	ng-related property?	
■ No. Go to Part 7.				
☐ Yes. Go to line 47.				
Part 7: Describe All Property Yo	ou Own or Have an Interest in That Yo	ou Did Not List Above		
53. Do you have other property of <i>Examples:</i> Season tickets, cour		t?		
■ No	itty oldb momboromp			
☐ Yes. Give specific information				
			Γ	
54. Add the dollar value of all of	your entries from Part 7. Write th	hat number here		\$0.00
Part 8: List the Totals of Each Pa	art of this Form			
55. Part 1: Total real estate, line	2			\$0.00
56. Part 2: Total vehicles, line 5	Z	\$42,410.00		φυ.υυ
57. Part 3: Total personal and he	ousehold items, line 15	\$1,250.00		
58. Part 4: Total financial assets		\$850.00		
59. Part 5: Total business-relate	d property, line 45	\$0.00		
60. Part 6: Total farm- and fishin	g-related property, line 52	\$0.00		
61. Part 7: Total other property	not listed, line 54	+ \$0.00		
62. Total personal property. Add	lines 56 through 61	\$44,510.00	Copy personal property to	stal \$44,510.00
63. Total of all property on Sche	edule A/B. Add line 55 + line 62			\$44,510.00

Official Form 106A/B Schedule A/B: Property page 5

Fill in this infor	mation to identify your	case:		
Debtor 1	Yolanda Gail Har	rell-Fenton		
	First Name	Middle Name	Last Name	_
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
\$25,184.00		\$2,400.00	735 ILCS 5/12-1001(c)
		100% of fair market value, up to any applicable statutory limit	
\$600.00		\$600.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$150.00		\$150.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$500.00		\$500.00	735 ILCS 5/12-1001(a)
		100% of fair market value, up to any applicable statutory limit	
\$200.00		\$200.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to	
	\$25,184.00 \$600.00 \$150.00	\$25,184.00	Copy the value from Schedule A/B \$25,184.00 \$25,184.00 \$25,184.00 \$200.00 \$2,400.00 \$2,400.00 \$2,400.00 \$3,400.00 \$4,000.00 \$4,000.00 \$4,000.00 \$4,000.00 \$4,000.00 \$4,000.00 \$4,000.00 \$4,000.00 \$4,000.00 \$4,000.00 \$4,000.00 \$4,000.00 \$4,000.00 \$4,000.00 \$4,000.00 \$5,000.00 \$5,000.00 \$5,000.00 \$5,000.00 \$5,000.00 \$5,000.00 \$5,000.00 \$5,000.00 \$5,000.00 \$5,000.00 \$5,000.00 \$5,000.00

	i i i i i i i i i i i i i i i i i i i			odoc Humber (II known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Pension - 100% Exempt Line from Schedule A/B: 21.1	Unknown		100%	735 ILCS 5/12-1006
	Line Hotti Schedule Arb. 21.1			100% of fair market value, up to any applicable statutory limit	
	Term Life Insurance - No cash surrender value	\$0.00		100%	735 ILCS 5/12-1001(f)
	Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
	Workman's Compensation Claim - 100& Exempt	Unknown		100%	820 ILCS 305/21
	Line from Schedule A/B: 33.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every ■ No □ Yes. Did you acquire the property cover	3 years after that for ca	ases fi	•	,
	□ No			, , ,	•
	☐ Yes				

		Document	Page 17	of 55		
Fill in this informa	ation to identify you	r case:				
Debtor 1	Yolanda Gail Ha					
Dahtar 0	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bank	kruptcy Court for the:	NORTHERN DISTRICT OF IL	LINOIS			
Case number						
(if known)					_	if this is an led filing
Official Form	106D					
		Who Have Claims	Secured	by Property	У	12/15
		f two married people are filing toget out, number the entries, and attach i				
1. Do any creditors h	ave claims secured by	your property?				
☐ No. Check t	this box and submit th	nis form to the court with your other	er schedules. Yo	ou have nothing else to	o report on this form.	
_	all of the information b	·				
		Delow.				
Part 1: List All	Secured Claims			Column A	Column B	Column C
for each claim. If mor	re than one creditor has	nore than one secured claim, list the co a particular claim, list the other credito cal order according to the creditor's na	ors in Part 2. As	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
2.4 Conital One	o Auto Einanaa	Describe the property that accuracy	the eleim	value of collateral. \$25,184.00	claim	If any
2.1 Capital One Creditor's Name	e Auto Finance	Describe the property that secures		\$25,164.UU	\$25,184.00	\$0.00
Ordator o reamo		2015 Jeep Cherokee 46,000	miles			
P.O. Box 60	0511					
City of Indu		As of the date you file, the claim is apply.	: Check all that			
91716	, ,	Contingent				
Number, Street, C	City, State & Zip Code	☐ Unliquidated				
rambon, oncon, o	ony, craite a 2.p code	☐ Disputed				
Who owes the deb	t? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only		☐ An agreement you made (such as		ured		
_ ′		car loan)	, mortgage or coo.	urou		
☐ Debtor 2 only						
Debtor 1 and Deb		☐ Statutory lien (such as tax lien, m	echanic's lien)			
☐ At least one of the		☐ Judgment lien from a lawsuit				
☐ Check if this clai community debt		☐ Other (including a right to offset)				
Date debt was incur	red	Last 4 digits of account nur	mber <u>2562</u>			
First Mid A	merica Credit					
Union		Describe the property that secures	s the claim:	\$17,226.00	\$17,226.00	\$0.00
Creditor's Name		2012 Ford Fusion 70,000 m Debtor is surrendering the				
		As of the data was file the alaim is				
	mrock Street	As of the date you file, the claim is apply.	Check all that			
East Alton,	, IL 62024	Contingent				
Number, Street, C	City, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the deb	t? Check one.	Nature of lien. Check all that apply	•			
Debtor 1 only		☐ An agreement you made (such as	s mortgage or sec	ured		
Debtor 2 only		car loan)				
Debtor 1 and Deb	otor 2 only	☐ Statutory lien (such as tax lien, m	echanic's lien)			
☐ At least one of the	•	☐ Judgment lien from a lawsuit	•			
☐ Check if this clai	im relates to a	☐ Other (including a right to offset)				
community debt		,				
Date debt was incur	red	Last 4 digits of account nur	mber 5875			

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Debtor 1	Yolanda Gai	I Harrell-Fenton		Case number (if know)	
	First Name	Middle Name	Last Name		
Add the	dollar value of yo	our entries in Column A on t	his page. Write that number here:	\$42,410.00	
	the last page of gat number here:	your form, add the dollar val	ue totals from all pages.	\$42,410.00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Cill in			Documen	t Page 1	9 of 55	
	this informa	ation to identify your	case:			
Debto	r 1	Yolanda Gail Harı	ell-Fenton			
Dobio		First Name	Middle Name	Last Name		
Debto						
(Spouse	e if, filing)	First Name	Middle Name	Last Name		
United	d States Bank	kruptcy Court for the:	NORTHERN DISTRICT C	F ILLINOIS		
0						
Case (if know	number n)				-	7 Check if this is an
	,					amended filing
						ŭ
<u>Offic</u>	ial Form	106E/F				
3ch	edule E/	F: Creditors W	ho Have Unsecur	ed Claims		12/15
ichedu ichedu eft. Att ame a	ule G: Executo ule D: Creditor ach the Conti and case numb	ory Contracts and Unexp rs Who Have Claims Sec nuation Page to this pag ber (if known).	ired Leases (Official Form 106 ured by Property. If more space le. If you have no information	G). Do not include ce is needed, copy	contracts on Schedule A/B: Property (Cany creditors with partially secured clothe Part you need, fill it out, number the not file that Part. On the top of any	aims that are listed in e entries in the boxes on the
Part 1		of Your PRIORITY Un				
		s have priority unsecure	d claims against you?			
	No. Go to Par	rt 2.				
	Yes.					
Part 2	List All	of Your NONPRIORIT	Y Unsecured Claims			
3. Do	any creditors	s have nonpriority unsec	cured claims against you?			
	No. You have	e nothing to report in this p	art. Submit this form to the cour	t with your other sche	edules.	
_	l No. You have l _{Yes.}	e nothing to report in this p	art. Submit this form to the cour	t with your other sche	edules.	
4. Li un tha	Yes. st all of your nate	nonpriority unsecured cl , list the creditor separately	aims in the alphabetical order y for each claim. For each claim	of the creditor who listed, identify what	wholds each claim. If a creditor has more type of claim it is. Do not list claims alread three nonpriority unsecured claims fill out	dy included in Part 1. If more
4. Li un tha	Yes. st all of your nation one creditor	nonpriority unsecured cl , list the creditor separately	aims in the alphabetical order y for each claim. For each claim	of the creditor who listed, identify what	holds each claim. If a creditor has mor ype of claim it is. Do not list claims alread	dy included in Part 1. If more
4. Lis un tha Pa	Yes. st all of your n isecured claim, an one creditor art 2.	nonpriority unsecured cl , list the creditor separately	aims in the alphabetical order y for each claim. For each claim st the other creditors in Part 3.lf	of the creditor who listed, identify what	holds each claim. If a creditor has mor ype of claim it is. Do not list claims alread	dy included in Part 1. If more at the Continuation Page of
4. Lis un tha Pa	Yes. st all of your n secured claim, an one creditor art 2. ACL Labe Nonpriority (nonpriority unsecured cl , list the creditor separately r holds a particular claim, li oratories Creditor's Name	aims in the alphabetical order y for each claim. For each claim st the other creditors in Part 3.lf Last 4 digits o	of the creditor who listed, identify what to you have more than	pholds each claim. If a creditor has mor ype of claim it is. Do not list claims alread three nonpriority unsecured claims fill ou	dy included in Part 1. If more it the Continuation Page of
4. Lis un tha Pa	Yes. st all of your nusecured claim, an one creditor art 2. ACL Laber Nonpriority (P.O. Box	nonpriority unsecured cl , list the creditor separately r holds a particular claim, li oratories Creditor's Name	aims in the alphabetical order y for each claim. For each claim st the other creditors in Part 3.lf Last 4 digits o	of the creditor who listed, identify what i you have more than	pholds each claim. If a creditor has mor ype of claim it is. Do not list claims alread three nonpriority unsecured claims fill ou	dy included in Part 1. If more at the Continuation Page of
4. Lii un tha Pa	Yes. st all of your nusecured claim, an one creditor art 2. ACL Laboratory (P.O. Box West Alli	nonpriority unsecured cl , list the creditor separately r holds a particular claim, li oratories Creditor's Name	aims in the alphabetical order y for each claim. For each claim ist the other creditors in Part 3.lf Last 4 digits of	of the creditor who listed, identify what if you have more than of account number debt incurred?	p holds each claim. If a creditor has more type of claim it is. Do not list claims alread three nonpriority unsecured claims fill out 2654	dy included in Part 1. If more at the Continuation Page of
4. Lii un tha Pa	ACL Labor Nonpriority OP.O. Box West Alli	nonpriority unsecured cl , list the creditor separately r holds a particular claim, li oratories Creditor's Name 27901 is, WI 53227	aims in the alphabetical order y for each claim. For each claim ist the other creditors in Part 3.lf Last 4 digits of	of the creditor who listed, identify what if you have more than of account number debt incurred?	pholds each claim. If a creditor has mor ype of claim it is. Do not list claims alread three nonpriority unsecured claims fill ou	dy included in Part 1. If more at the Continuation Page of
4. Lii un tha Pa	ACL Labe Nonpriority O P.O. Box West Alli Number Stre Who incurre	nonpriority unsecured cl i, list the creditor separately r holds a particular claim, li oratories Creditor's Name 2 27901 is, WI 53227 eet City State Zlp Code red the debt? Check one.	aims in the alphabetical order y for each claim. For each claim ist the other creditors in Part 3.lf Last 4 digits of When was the	of the creditor who listed, identify what i you have more than of account number debt incurred?	p holds each claim. If a creditor has more type of claim it is. Do not list claims alread three nonpriority unsecured claims fill out 2654	dy included in Part 1. If more at the Continuation Page of
4. Lii un tha Pa	ACL Labor Nonpriority OP.O. Box West Alli	nonpriority unsecured cl , list the creditor separately r holds a particular claim, li oratories Creditor's Name 27901 is, WI 53227 eet City State Zlp Code red the debt? Check one. only	aims in the alphabetical order y for each claim. For each claim ist the other creditors in Part 3.lf Last 4 digits of When was the As of the date	of the creditor who listed, identify what i you have more than of account number debt incurred?	p holds each claim. If a creditor has more type of claim it is. Do not list claims alread three nonpriority unsecured claims fill out 2654	dy included in Part 1. If more at the Continuation Page of
4. Lii un tha Pa	ACL Laborate ACL L	oratories Creditor's Name 27901 is, WI 53227 eet City State Zlp Code ed the debt? Check one.	aims in the alphabetical order of for each claim. For each claim ist the other creditors in Part 3.If Last 4 digits of When was the As of the date Contingent Unliquidate	of the creditor who listed, identify what i you have more than of account number debt incurred?	p holds each claim. If a creditor has more type of claim it is. Do not list claims alread three nonpriority unsecured claims fill out 2654	dy included in Part 1. If more at the Continuation Page of
4. Lii un tha Pa	ACL Labe Nonpriority O P.O. Box West Alli Number Stre Who incurre Debtor 1 Debtor 1	oratories Creditor's Name 27901 is, WI 53227 eet City State Zlp Code ed the debt? Check one. only 2 only and Debtor 2 only	aims in the alphabetical order y for each claim. For each claim ist the other creditors in Part 3.lf Last 4 digits of When was the As of the date Contingent Unliquidate Disputed	of the creditor who listed, identify what i you have more than of account number debt incurred?	pholds each claim. If a creditor has more type of claim it is. Do not list claims alread three nonpriority unsecured claims fill out the company of the comp	dy included in Part 1. If more at the Continuation Page of
4. Lii un tha Pa	ACL Labe Nonpriority (P.O. Box West Alli Number Stre Who incurre Debtor 1 Debtor 1 At least of	oratories Creditor's Name 27901 is, WI 53227 eet City State Zlp Code ed the debt? Check one. only and Debtor 2 only one of the debtors and and	aims in the alphabetical order y for each claim. For each claim ist the other creditors in Part 3.lf Last 4 digits of When was the As of the date Contingent Unliquidate Disputed Type of NONP	of the creditor who listed, identify what i you have more than of account number debt incurred? you file, the claim of th	pholds each claim. If a creditor has more type of claim it is. Do not list claims alread three nonpriority unsecured claims fill out the company of the comp	dy included in Part 1. If more at the Continuation Page of
4. Lii un tha Pa	ACL Labe Nonpriority (P.O. Box West Alli Number Stre Who incurre Debtor 1 Debtor 1 At least (Check if debt	oratories Creditor's Name 27901 is, WI 53227 eet City State Zlp Code ed the debt? Check one. only only and Debtor 2 only one of the debtors and and f this claim is for a comme	aims in the alphabetical order of for each claim. For each claim ist the other creditors in Part 3.lf Last 4 digits of When was the As of the date Contingent Unliquidate Disputed Type of NONP Type of NONP Type of NONP Obligations	of the creditor who listed, identify what is you have more than of account number a debt incurred? you file, the claim of	pholds each claim. If a creditor has more type of claim it is. Do not list claims alread three nonpriority unsecured claims fill out the company of the comp	ty included in Part 1. If more at the Continuation Page of Total claim \$1,443.00
4. Lii un tha Pa	ACL Laber Nonpriority (P.O. Box West Alli Number Strewho incurred Debtor 1 Debtor 1 At least (Check if debt Is the claim)	oratories Creditor's Name 27901 is, WI 53227 eet City State Zlp Code ed the debt? Check one. only and Debtor 2 only one of the debtors and and	aims in the alphabetical order of for each claim. For each claim ist the other creditors in Part 3.If Last 4 digits of When was the As of the date Contingent Unliquidate Disputed Type of NONP munity Student loa Cobligations report as priorit	of the creditor who listed, identify what is you have more than of account number a debt incurred? you file, the claim of	pholds each claim. If a creditor has more your of claim it is. Do not list claims alread three nonpriority unsecured claims fill out 2654 s: Check all that apply d claim: ration agreement or divorce that you did	ty included in Part 1. If more at the Continuation Page of Total claim \$1,443.00
4. Li	ACL Labe Nonpriority (P.O. Box West Alli Number Stre Who incurre Debtor 1 Debtor 1 At least (Check if debt	oratories Creditor's Name 27901 is, WI 53227 eet City State Zlp Code ed the debt? Check one. only only and Debtor 2 only one of the debtors and and f this claim is for a comme	aims in the alphabetical order of for each claim. For each claim ist the other creditors in Part 3.If Last 4 digits of When was the As of the date Contingent Unliquidate Disputed Type of NONP Student load Obligations report as priorit Debts to pe	of the creditor who listed, identify what is you have more than of account number a debt incurred? you file, the claim of	bholds each claim. If a creditor has more ype of claim it is. Do not list claims alread three nonpriority unsecured claims fill out 2654 2654 s: Check all that apply d claim: ration agreement or divorce that you did g plans, and other similar debts	ty included in Part 1. If more at the Continuation Page of Total claim \$1,443.00

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4.2	ACL Laboratories	Last 4 digits of account number 5096	\$309.00
	Nonpriority Creditor's Name 8901 West Lincoln Avenue West Allis, WI 53227	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Bills: for Candace Fenton	
4.3	ADT	Last 4 digits of account number 2332	\$233.00
	Nonpriority Creditor's Name P.O. Box 371878 Pittsburgh, PA 15250	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Debt Owed	
4.4	Advocate Christ Medical Center	Last 4 digits of account number 5411	\$326.00
	Nonpriority Creditor's Name P.O. Box 4256	When was the debt incurred?	
	Carol Stream, IL 60197	When was the destiniculed:	
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Bills	

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4.5	Advocate Health Care	Last 4 digits of account number 2285	\$601.00
	Nonpriority Creditor's Name P.O. Box 4256	When was the debt incurred?	
	Carol Stream, IL 60197		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Bills	
4.6	Am Psychological Serv. Nonpriority Creditor's Name	Last 4 digits of account number	\$820.00
	6640 S. Cicero 4th Floor	When was the debt incurred?	
	Bedford Park, IL 60638 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Bills	
4.7	Comcast	Last 4 digits of account number 6924	\$451.00
	Nonpriority Creditor's Name P.O. Box 173885	When was the debt incurred?	<u> </u>
	Denver, CO 80217 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Cable Bill	

Document Page 22 of 55 Debtor 1 Yolanda Gail Harrell-Fenton Case number (if know) 4.8 \$395.00 Comenity Bank/Eddie Baur Last 4 digits of account number 2674 Nonpriority Creditor's Name P.O. Box 182789 When was the debt incurred? Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card Debt ☐ Yes 4.9 **Commenity Capital/HSN** \$771.00 Last 4 digits of account number XXXX Nonpriority Creditor's Name P.O. Box 182789 When was the debt incurred? Columbus, OH 43218 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes 4.1 **Credit One Bank** \$1,538.00 XXXX Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 98872 When was the debt incurred? Las Vegas, NV 89193 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only

Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes

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4.1 1	Dr. Nora Bellos Nonpriority Creditor's Name	Last 4 digits of account number 1080	\$1,300.00
	10448 S. Pulaski Oak Lawn, IL 60453	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Bills	
4.1	Great American Finance Company Nonpriority Creditor's Name	Last 4 digits of account number XXXX	\$1,397.00
	20 North Wacker Drive Ste. 2275	When was the debt incurred?	
	Chicago, IL 60606 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Debt Owed	
4.1	HSN	Last 4 digits of account number 4749	\$772.00
	Nonpriority Creditor's Name P.O. Box 659707 San Antonio, TX 78265	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card Debt	

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4.1 4	Kohls Department Store	Last 4 digits of account number XXXX	\$295.00
	Nonpriority Creditor's Name P.O. Box 3115	When was the debt incurred?	
	Milwaukee, WI 53201 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card Debt	
4.1	Mokena Foot/Ankle	Last 4 digits of account number 7588	\$1,305.00
<u> </u>	Nonpriority Creditor's Name 19841 S. Wolf Road	When was the debt incurred?	
	Mokena, IL 60448 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Bills	
4.1 6	Nissan Motor Acceptance Corporation	Last 4 digits of account number 9170	\$12,782.00
	Nonpriority Creditor's Name P.O. Box 660366	When was the debt incurred?	*************************************
	Dallas, TX 75266 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Automobile Deficiency	
	⊔ Yes	Other. Specify Automobile Deficiency	

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South Division Credit Union	Last 4 digits of account number XXXX	\$1,277.0
Nonpriority Creditor's Name 9122 S. Kedzie Avenue Evergreen Park, IL 60805	When was the debt incurred?	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit Card Debt	
Southwest OB/Gyn	Last 4 digits of account number 9823	\$300.
Nonpriority Creditor's Name 4225 W 95th	When was the debt incurred?	
Oak Lawn, IL 60453 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical Bills	
SSM Health/Ste. Mary's	Last 4 digits of account number 0279	\$30.
Nonpriority Creditor's Name P.O. Box 776477	When was the debt incurred?	
Chicago, IL 60677 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Medical Bills	

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4.2 0	St. Mary's Hospital	Last 4 digits of account number 0270	\$30.00
	Nonpriority Creditor's Name P.O. Box 505209	When was the debt incurred?	
	Saint Louis, MO 63150 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Medical Bills	
4.2 1	Verizon	Last 4 digits of account number 0001	\$2,484.00
	Nonpriority Creditor's Name 5000 Britton Road Hilliard, OH 43026	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	io the claim cabjeet to enect.		
	■ No	Debts to pension or profit-sharing plans, and other similar debts	

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$
Total	6f.	Student loans	6f.	Total Claim \$ 0.00
claims from Part 2	6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6g. 6h.	\$ 0.00 \$ 0.00
		, , , , , , , , , , , , , , , , , , , ,		

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Debtor 1 Yolanda Gail Harrell-Fenton

6j.

Other. Add all other nonpriority unsecured claims. Write that amount here.

6i. 28,859.00 \$

Total Nonpriority. Add lines 6f through 6i.

28,859.00

		17////////	311 1 14(4): 7 (7 (7): 7): 7	
Fill in this infor	mation to identify your	case:		
Debtor 1	Yolanda Gail Har	rell-Fenton		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this i
				amended filin

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Numbe	whom you have the r, Street, City, State and ZIP (contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	City		State	Zii Code	
	Name				
	Number	Street			
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			
	City		State	ZIP Code	_

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		DUGUITIE	III Paue /9 t	<u> </u>	
Fill in this	information to identify your				
Debtor 1	Yolanda Gail Har	rell-Fenton			
.	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case num	har				
(if known)					Check if this is an amended filing
Officia	l Form 106H			<u>.</u>	
	lule H: Your Cod	ebtors			12/15
iill it out, a your name 1. Do No Yes 2. With Arizon No. Yes	nd number the entries in the and case number (if known) you have any codebtors? (If yo	boxes on the left. Attack. Answer every question you are filing a joint case, a lived in a community provided in a community p	the Additional Page to	y? (<i>Community property states an</i> ington, and Wisconsin.)	dditional Pages, write d territories include
in line Form	2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make	if your spouse is filing with you sure you have listed the creditor 6G). Use Schedule D, Schedule	on Schedule D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and Zl	P Code		Column 2: The creditor to will Check all schedules that appl	
_	Name Number Street		7150	☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street City	State	ZIP Code		
	•				

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Fill	in this information to identify your c	ase:				I				
	, ,	l Harrell-Fenton								
	otor 2				_					
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS							
	se number 					☐ A sup	nended filir plement sl	nowing p	postpetition cowing date:	hapter
0	fficial Form 106I					MM /	DD/ YYYY	.		
S	chedule I: Your Inc	ome								12/15
sup spo atta	s complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing w	ng jointly, and your sith you, do not include	spouse de infor	is livi matic	ing with you on about you	ı, include i ur spouse.	nformat . If more	tion about y space is ne	our eeded,
1.	Fill in your employment information.		Debtor 1			De	btor 2 or r	on-filin	g spouse	
	If you have more than one job,	Employment status	■ Employed				Employed			
	attach a separate page with information about additional	Employment status	☐ Not employed				☐ Not employed			
	employers.	Occupation	Mental Health S	peciali	st					
	Include part-time, seasonal, or self-employed work.	Employer's name	Elizabith Ludem	an Dev	. Ce	enter				
	Occupation may include student or homemaker, if it applies.	Employer's address	114 N. Orchard Park Forest, IL 6							
		How long employed t	here? <u>1 year</u>							
Par	t 2: Give Details About Mor	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to re	eport for	any I	ine, write \$0	in the space	ce. Includ	de your non-	filing
	u or your non-filing spouse have most space, attach a separate sheet to		ombine the information	n for all e	emplo	oyers for that	person on	the lines	s below. If yo	ou need
						For Debtor		or Debto on-filing	or 2 or spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	3,481	1.00 \$		N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	(0.00 <u>+</u> \$;	N/A	

3,481.00

\$

N/A

Calculate gross Income. Add line 2 + line 3.

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Deb	tor 1	Yolanda Gail Harrell-Fenton	_	С	ase	number (if kno	own)				
					For	Debtor 1			Debtor filing s	2 or	
	Сор	y line 4 here	4.		\$	3,481	.00	\$	illing 5	N/A	<u> </u>
5.	List	all payroll deductions:									
	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a. 5b.		\$ \$	636 139		\$		N/A	
	5c. 5d.	Voluntary contributions for retirement plans Required repayments of retirement fund loans	5c. 5d.		\$ 	0	.00	\$		N/A	<u> </u>
	5e. 5f. 5g.	Insurance Domestic support obligations Union dues	5e. 5f. 5g.		\$_ _ \$_		.00	\$ \$		N/A N/A	<u> </u>
6.	5h.	Other deductions. Specify: the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	5h. 6.	.+	\$ _ \$.00	+ \$		N/A	<u>\</u>
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	,	· — \$	2,257		\$		N/A	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.		\$	·	.00	\$		N/A	_
	8b.	Interest and dividends	8b.		\$-		.00	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		\$	0	.00	\$		N/A	_ \
	8d.	Unemployment compensation	8d.		\$_		.00	\$		N/A	_
	8e. 8f.	Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.			\$.00	\$		N/A	_
	8g.	Specify: Pension or retirement income	_ 8f. 8g.		\$_ \$.00	\$		N/A	_
	8h.	Other monthly income. Specify: 2nd Job - Walgreens	8h.		\$_	574		+ \$		N/A	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		574	.00	\$		N/	A
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_	:	2,831.00	+ \$_		N/A	= \$ _	2,831.00
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ide contributions from an unmarried partner, members of your household, your r friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	depe			•			chedule 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines							12.	\$	2,831.00
13.	Do	ou expect an increase or decrease within the year after you file this form	?						'	Comb	ined ly income
		No. Yes Explain:									

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E:III	in this informa	tion to identify yo								
FIII	in this informa	tion to identify yo	our case.							
Deb	tor 1	Yolanda Gail	Harrell-	Fenton				f this is:		
Deh	otor 2						•	amended filing	ving postpetition cha	ntor
	ouse, if filing)								the following date:	ibiei
								·		
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS							M	M / DD / YYYY		
Cas	e number									
(If k	nown)									
\cap	fficial Fo	rm 106 l								
		J: Your I	 Evnor	1606						40/45
				ISES . If two married people ar	e filing together, ho	th are e	nually	v responsible fo	or supplying correc	12/15
info	ormation. If m		eded, atta	ch another sheet to this						
Par	t 1: Descr	ibe Your House	hold							
1.	Is this a join	t case?								
	■ No. Go to	line 2.								
	☐ Yes. Doe	s Debtor 2 live i	n a separ	ate household?						
	□ No	0								
	☐ Ye	es. Debtor 2 mus	t file Offici	al Form 106J-2, Expenses	for Separate Housel	hold of D	ebtor	2.		
2.	Do you have	e dependents?	□ No							
۷.	•	•			Danas dandia saladia			Daman dandia	Dana danan dana	
	Do not list De Debtor 2.	eptor 1 and	Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		_	Dependent's age	Does dependent live with you?	
	Do not state	the							□ No	
	dependents				Daughter			18 years	■ Yes	
									□ No	
					Son			23 year	Yes	
									□ No	
									☐ Yes	
									□ No	
3.	Do your eyn	enses include	_						☐ Yes	
٥.		f people other th	าลท	No						
	yourself and	d your depender	nts? ⊔	Yes						
Par	t 2: Estima	ate Your Ongoir	na Month	v Expenses						
Est	imate your ex	penses as of yo	our bankr	uptcy filing date unless y y is filed. If this is a supp						
•	olicable date.		арто	, .ccac a capp		o, oo				
				government assistance i						
	value of such ficial Form 10		d have ind	cluded it on Schedule I: \	our Income			Your expe	enses	
(Oi	ilciai Folili 10	01.)						1001071		
4.	The rental o	r home ownersl	hip expen	ses for your residence.	nclude first mortgage	!			040.00	
	payments an	d any rent for the	e ground o	r lot.		4.	\$_		810.00	
	If not includ	ed in line 4:								
	4a. Real e	state taxes				4a.	_		0.00	
	•	rty, homeowner's				4b.	–		15.00	
				ipkeep expenses		4c.	_ : -		0.00	
5.		owner's associati nortgage payme		dominium dues Dur residence, such as ho	me equity loans	4d. 5.	\$ \$		0.00	
			,			٥.	~		0.00	

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il Harrell-Fenton	Case num	ber (if known)	
at, natural gas	6a.	\$	50.00
•			0.00
		·	290.00
•		·	0.00
		·	500.00
		·	
		·	0.00
· ·		· -	100.00
		·	55.00
•	11.	\$	130.00
	12	\$	120.00
		·	0.00
		· -	
itions and religious donations	14.	Φ	0.00
ance deducted from your pay or included in lines 4 or 20			
		\$	0.00
		·	0.00
		·	116.00
· · ·		>	0.00
le taxes deducted from your pay or included in lines 4 or		¢.	0.00
		Ф	0.00
	170	¢	0.00
		· -	0.00
		·	0.00
		·	0.00
		\$	0.00
		\$	0.00
	m 1061).	·	0.00
u make to support others who do not live with you.	10	Ψ	0.00
expenses not included in lines 4 or 5 of this form or		our Incomo	
			0.00
			0.00
		·	
			0.00
			0.00
association or condominium dues		·	0.00
	21.	+\$	0.00
athly expenses			
7 .		\$	2,186.00
•	106 L-2		2,100.00
	1000-2	·	
a 22b. The result is your monthly expenses.		5	2,186.00
thly net income.		l	
•	23a.	\$	2,831.00
			2,186.00
many expenses from the 220 above.	230.		2,100.00
monthly expenses from your monthly income			
	23c.	\$	645.00
		μ	
ncrease or decrease in your expenses within the yea	r after you file this	form?	
spect to finish paying for your car loan within the year or do you			or decrease because of
s of your mortgage?			
plain here:			
	garbage collection Il phone, Internet, satellite, and cable services : :pping supplies Iren's education costs und dry cleaning ucts and services expenses ude gas, maintenance, bus or train fare. ayments. sance deducted from your pay or included in lines 4 or 20 uce nace exe. Specify: le taxes deducted from your pay or included in lines 4 or payments: for Vehicle 1 for Vehicle 2 : : : : : : : : : : : : : : : : : : :	at, natural gas garbage collection II phone, Internet, satellite, and cable services Exping supplies Fren's education costs Ren's education Ren's educ	garbage collection 6b. \$

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					•		
Fill in this infor	mation to identify your	case:					
Debtor 1	Yolanda Gail Harrell-Fenton						
	First Name	Middle Name	Last Name				
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name				
United States Ba	ankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS				
Case number (if known)					☐ Check if this is an amended filing		
Official Ford	-	an Individua	l Debtor's S	Schedules	12/15		
If two married p	eople are filing togethe	er, both are equally resp	onsible for supplying o	correct information.			
obtaining mone		in connection with a ba			tement, concealing property, or 100, or imprisonment for up to 20		
Sig	n Below						
Did you pa	ay or agree to pay some	eone who is NOT an atto	orney to help you fill ou	it bankruptcy forms?			
■ No							
☐ Yes.	Name of person				nkruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)		
that they ar	alty of perjury, I declare re true and correct. landa Gail Harrell-Fe	that I have read the su	mmary and schedules f	iiled with this declarati	ion and		
	da Gail Harrell-Fentoure of Debtor 1	n	Signature	of Debtor 2			

Date

Date October 4, 2016

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Fill	l in this inform	nation to identify you	case:						
	btor 1	Yolanda Gail Ha							
DC	DIOI I	First Name	Middle Name	Last Name					
_	btor 2 ouse if, filing)	First Name	Middle Name	Last Name					
Un	ited States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS					
	se number nown)				-	Check if this is an amended filing			
	ficial For		Affairs for Indivi	duals Filing for B	ankruptcy	4/10			
Be a info nun	as complete a ormation. If me nber (if known	nd accurate as possi ore space is needed, a). Answer every ques	ble. If two married people attach a separate sheet to	are filing together, both are this form. On the top of any	equally responsible for sup				
1.		current marital statu		u 2.110u 201010					
	☐ Married■ Not married								
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?					
	_ N	_							
	□ No ■ Vos List	t all of the places you li	ived in the last 3 years. Do r	oot include where you live new	,				
	Tes. Lisi	■ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.							
	Debtor 1 Pri	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there			
	2331 Frank Apt. A6 Carlyle, IL		From-To: 2014 - 2015	☐ Same as Debtor		☐ Same as Debtor 1 From-To:			
	es and territorion ■ No □ Yes. Ma	es include Arizona, Ca	lifornia, Idaho, Louisiana, Ne	egal equivalent in a commun evada, New Mexico, Puerto R Official Form 106H).					
4.	Fill in the tota	I amount of income yo	u received from all jobs and	ng a business during this ye all businesses, including part- ve together, list it only once ur	time activities.	endar years?			
	□ No ■ Yes. Fill	in the details.							
			Debtor 1		Debtor 2				
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)			

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Case number (if known) Document

Debtor 1 Yolanda Gail Harrell-Fenton

	D-144		Dalifara C	
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$23,355.75	☐ Wages, commissions, bonuses, tips	
	☐ Operating a business		☐ Operating a business	
For last calendar year: (January 1 to December 31, 2015)	■ Wages, commissions, bonuses, tips	\$42,871.00	☐ Wages, commissions, bonuses, tips	
	☐ Operating a business		☐ Operating a business	
For the calendar year before that: (January 1 to December 31, 2014)	■ Wages, commissions, bonuses, tips	\$29,524.00	☐ Wages, commissions, bonuses, tips	
	☐ Operating a business		☐ Operating a business	
For the calendar year: (January 1 to December 31, 2013)	■ Wages, commissions, bonuses, tips	\$5,003.00	☐ Wages, commissions, bonuses, tips	
	☐ Operating a business		☐ Operating a business	
For the calendar year: (January 1 to December 31, 2012)	■ Wages, commissions, bonuses, tips	\$1,480.00	☐ Wages, commissions, bonuses, tips	
	☐ Operating a business		☐ Operating a business	
winnings. If you are filing a joint cast List each source and the gross inco No Yes. Fill in the details.	,	,	•	
	Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
For the calendar year before that: (January 1 to December 31, 2014)	Social Security	\$6,367.00		
For the calendar year: (January 1 to December 31, 2013)	Social Security and Pension Distribution	\$88,773.00		
Part 3: List Certain Payments You	Made Before You Filed for	Bankruptcv		
		-		
	•	umer debts. Consumer debts	s are defined in 11 U.S.C. § 10	01(8) as "incurred by an
During the 90 days before No. Go to line 7	I of \$6,425* or more?			
☐ Yes List below on paid that or	each creditor to whom you pa reditor. Do not include payme	nts for domestic support oblig	n one or more payments and ations, such as child support	
	payments to an attorney for t t on 4/01/19 and every 3 year		or after the date of adjustmen	ŧ

Official Form 107

Document Page 37 of 55 ase number (if known) Debtor 1 Yolanda Gail Harrell-Fenton Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address **Dates of payment Total amount** Amount you Was this payment for ... paid still owe Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Dates of payment Total amount Amount you Reason for this payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No ☐ Yes. Fill in the details. Status of the case Case title Nature of the case Court or agency Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Date Value of the property Explain what happened 2015 **Nissan Acceptance** 2013 Nissan Rogue \$12,000.00 P.O. Box 660360 Dallas, TX 75266 Property was repossessed. ☐ Property was foreclosed.

☐ Property was attached, seized or levied.

☐ Property was garnished.

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Case number (if known) Document Debtor 1 Yolanda Gail Harrell-Fenton

11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No					
	☐ Yes. Fill in the details.					
	Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount		
12.		Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?				
	Yes					
Par						
13.	 Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift. 	ccy, did you give any gifts with a total value of more tl	han \$600 per person?	•		
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value		
	Person to Whom You Gave the Gift and Address:					
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution.					
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value		
Par	t 6: List Certain Losses					
15.	Within 1 year before you filed for bankrupto or gambling?	ry or since you filed for bankruptcy, did you lose anyt	thing because of thef	t, fire, other disaster,		
	■ No					
	☐ Yes. Fill in the details. Describe the property you lost and Details.	escribe any insurance coverage for the loss	Date of your	Value of property		
	how the loss occurred In	clude the amount that insurance has paid. List pending surance claims on line 33 of Schedule A/B: Property.	loss	lost		
Par	t 7: List Certain Payments or Transfers					
16.	consulted about seeking bankruptcy or pre	ey, did you or anyone else acting on your behalf pay oparing a bankruptcy petition? barers, or credit counseling agencies for services required		ty to anyone you		
	□ No					
	Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment		
	Law Offices of Jeffrey L. Benson 3337 W. 95th Street Ste. # 2 Evergreen Park, IL 60805	Attorney Fees	9/8/2016	\$200.00		
	jeffrey-benson@sbcglobal.net					

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ase number (if known) Debtor 1 Yolanda Gail Harrell-Fenton 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of Address transferred or transfer was payment made Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No П Yes. Fill in the details. Person Who Received Transfer Description and value of Describe any property or Date transfer was **Address** property transferred payments received or debts made paid in exchange Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. П No Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Date account was Last balance Address (Number, Street, City, State and ZIP account number instrument closed, sold. before closing or Code) moved, or transfer transferred **South Division Credit Union** XXXX-2016 \$150.00 Checking 9122 S. Kedzie Avenue □ Savings Evergreen Park, IL 60805 ☐ Money Market □ Brokerage □ Other

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

■ No

Yes. Fill in the details.

Name of Financial Institution
Address (Number, Street, City, State and ZIP Code)

Who else had access to it? Address (Number, Street, City, State and ZIP Code) Describe the contents

Do you still have it?

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Del	btor 1 Yolanda Gail Harrell-Fenton		3	C	Sase number (if known)	
22.	Have you stored property in a storage un	nit or p	lace other than your home within 1	1 ye	ear before you filed for bankruptcy	?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code	le)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	D	Describe the contents	Do you still have it?
Par	rt 9: Identify Property You Hold or Con	trol for	Someone Else			
23.	Do you hold or control any property that for someone.	t somed	one else owns? Include any proper	rty	you borrowed from, are storing fo	r, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code	e)	Where is the property? (Number, Street, City, State and ZIP Code)	D	Describe the property	Value
Par	rt 10: Give Details About Environmental	Inform	ation			
For	the purpose of Part 10, the following defi	initions	apply:			
	Environmental law means any federal, so toxic substances, wastes, or material integulations controlling the cleanup of the	to the a	ir, land, soil, surface water, ground		•	
	Site means any location, facility, or prop to own, operate, or utilize it, including di	-		lav	v, whether you now own, operate,	or utilize it or used
	Hazardous material means anything an chazardous material, pollutant, contamina	environ ant, or	mental law defines as a hazardous similar term.			substance,
·	oort all notices, releases, and proceedings Has any governmental unit notified you	-	· -		•	ental law?
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code	e)	Governmental unit Address (Number, Street, City, State an ZIP Code)	nd	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit	t of any	release of hazardous material?			
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code	e)	Governmental unit Address (Number, Street, City, State an ZIP Code)	nd	Environmental law, if you know it	Date of notice
26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include s						and orders.
	■ No □ Yes. Fill in the details.					
	Case Title Case Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	N	lature of the case	Status of the case
Par	rt 11: Give Details About Your Business	or Con	nections to Any Business			
27.	Within 4 years before you filed for bankr	ruptcy,	did you own a business or have ar	ny (of the following connections to an	y business?

☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time

☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)

Official Form 107

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Case number (if known) Document Debtor 1 Yolanda Gail Harrell-Fenton

	A control to a control to						
	☐ A partner in a partnership						
	☐ An officer, director, or managing ex	☐ An officer, director, or managing executive of a corporation					
	☐ An owner of at least 5% of the votin	☐ An owner of at least 5% of the voting or equity securities of a corporation					
	■ No. None of the above applies. Go to I	Part 12.					
	☐ Yes. Check all that apply above and fill	Yes. Check all that apply above and fill in the details below for each business.					
	Business Name Address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.				
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed				
28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties. No Yes. Fill in the details below.	cy, did you give a financial statement to an	yone about your business? Include all financial				
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued					
Par	rt 12: Sign Below						
are to with 18 U	true and correct. I understand that making a a bankruptcy case can result in fines up to J.S.C. §§ 152, 1341, 1519, and 3571. Yolanda Gail Harrell-Fenton	false statement, concealing property, or ob	eclare under penalty of perjury that the answers taining money or property by fraud in connection s, or both.				
	landa Gail Harrell-Fenton nature of Debtor 1	Signature of Debtor 2					
Dat	December 4, 2016	Date					
Did : ■ N	••	ent of Financial Affairs for Individuals Filing	for Bankruptcy (Official Form 107)?				
Did :	you pay or agree to pay someone who is no	t an attorney to help you fill out bankruptcy	forms?				
ПΥ	es. Name of Person Attach the Bankru	ptcy Petition Preparer's Notice, Declaration, ar	nd Signature (Official Form 119).				

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Revised as of 4/20/2015)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.

- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other

attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.

- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section

726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.

□The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:

- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$2,350.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$310.00
- 3. Before signing this agreement, the attorney has received, \$500.00

toward the flat fee, leaving a balance due of \$1,850.00; and \$0.00 for expenses,

leaving a balance due for the filing fee of \$0.00

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: October 4, 2016	
Signed:	
/s/ Yolanda Gail Harrell-Fenton	/s/ Jeffrey L. Benson
Yolanda Gail Harrell-Fenton	Jeffrey L. Benson 6203738
	Attorney for the Debtor(s)
Debtor(s)	
Do not sign this agreement if the amounts are b	lank. Local Bankruptcy Form 23c

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B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	Yolanda Gail Harrell-Fenton		Case N	0.	
		Debtor(s)	Chapte	r 13	
	DISCLOSURE OF COMP	ENSATION OF ATTO	RNEY FOR	DEBTOR(S)	
C	ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 ompensation paid to me within one year before the field rendered on behalf of the debtor(s) in contemplatio	ling of the petition in bankruptcy.	, or agreed to be p	aid to me, for services	at rendered or to
	For legal services, I have agreed to accept		\$	2,350.00	
	Prior to the filing of this statement I have receive			500.00	
	Balance Due		\$	1,850.00	
2. \$	310.00 of the filing fee has been paid.				
3. T	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4. T	the source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5. I	I have not agreed to share the above-disclosed cor	npensation with any other person	unless they are m	embers and associates	of my law firm.
[☐ I have agreed to share the above-disclosed competed copy of the agreement, together with a list of the r				law firm. A
6. I	n return for the above-disclosed fee, I have agreed to	render legal service for all aspect	ts of the bankrupto	cy case, including:	
b c.	Analysis of the debtor's financial situation, and ren Preparation and filing of any petition, schedules, st Representation of the debtor at the meeting of cred [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applicat 522(f)(2)(A) for avoidance of liens on h	tatement of affairs and plan which litors and confirmation hearing, and preduce to market value; ex- tions as needed; preparation	n may be required and any adjourned emption planni	; hearings thereof; ng; preparation and	filing of
7. B	y agreement with the debtor(s), the above-disclosed Representation of the debtors in any cany other adversary proceeding.	fee does not include the following dischargeability actions, judi	g service: icial lien avoida	nces, relief from st	ay actions or
		CERTIFICATION			
	certify that the foregoing is a complete statement of ankruptcy proceeding.	any agreement or arrangement for	r payment to me for	or representation of the	debtor(s) in
Da	ctober 4, 2016 ate	Isl Jeffrey L. Benson Jeffrey L. Benson Signature of Attorne Law Offices of Je 3337 W. 95th Stre Ste. # 2 Evergreen Park, 312-607-0048 Fa jeffrey-benson@	n 6203738 effrey L. Benso eet IL 60805 ax: 708-499-194		
		Name of law firm	socyionai.iiet		

United States Bankruptcy Court Northern District of Illinois

In re	Yolanda Gail Harrell-Fenton		Case No.	
		Debtor(s)	Chapter	13
	VERIFICATION OF CREDITOR MATRIX			
		Number of C	Creditors:	23
	The above-named Debtor(s) here (our) knowledge.	eby verifies that the list of credito	ors is true and	correct to the best of my
Date:	October 4, 2016	/s/ Yolanda Gail Harrell-Fenton Yolanda Gail Harrell-Fenton Signature of Debtor		

ACL Laboratories P.O. Box 27901 West Allis, WI 53227

ACL Laboratories 8901 West Lincoln Avenue West Allis, WI 53227

ADT P.O. Box 371878 Pittsburgh, PA 15250

Advocate Christ Medical Center P.O. Box 4256 Carol Stream, IL 60197

Advocate Health Care P.O. Box 4256 Carol Stream, IL 60197

Am Psychological Serv. 6640 S. Cicero 4th Floor Bedford Park, IL 60638

Capital One Auto Finance P.O. Box 60511 City of Industry, CA 91716

Comcast P.O. Box 173885 Denver, CO 80217

Comenity Bank/Eddie Baur P.O. Box 182789 Columbus, OH 43218

Commenity Capital/HSN P.O. Box 182789 Columbus, OH 43218

Credit One Bank P.O. Box 98872 Las Vegas, NV 89193 Dr. Nora Bellos 10448 S. Pulaski Oak Lawn, IL 60453

First Mid America Credit Union 419 N. Shamrock Street East Alton, IL 62024

Great American Finance Company 20 North Wacker Drive Ste. 2275 Chicago, IL 60606

HSN P.O. Box 659707 San Antonio, TX 78265

Kohls Department Store P.O. Box 3115 Milwaukee, WI 53201

Mokena Foot/Ankle 19841 S. Wolf Road Mokena, IL 60448

Nissan Motor Acceptance Corporation P.O. Box 660366 Dallas, TX 75266

South Division Credit Union 9122 S. Kedzie Avenue Evergreen Park, IL 60805

Southwest OB/Gyn 4225 W 95th Oak Lawn, IL 60453

SSM Health/Ste. Mary's P.O. Box 776477 Chicago, IL 60677

St. Mary's Hospital P.O. Box 505209 Saint Louis, MO 63150 Verizon 5000 Britton Road Hilliard, OH 43026